UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF NEW YORK

In Re:	imberly A. Putnam aka Kimberly A. Schwab	Case No.: 1–05–91145–CLB Chapter: 7 SSN: xxx–xx–1757
	Debtor(s)	SSIN. XXX-XX-1/3/
Brian J. D 28431 SE PO Box 2	Preston Way	
	osed is your application to request payment for unclair reason(s):	med funds. It is being returned to you for the
[]	Case Title and/or case number was not provided with Affidavit is not dated.	
[]	Claimant's current address was not provided with original affidavit. Claimant must state why check was not presented for payment at the time of original issuance. Requested amount of reimbursement must be stated on affidavit.	
[]	Affidavit must state that reimbursement checks will be "made payable to claimant only," that the "claimant is in fact due the monies," and that all information provided is done so "under penalty of perjury."	
[]	Affidavit must be notarized.	
[]	Notarized Power of Attorney is required for all claimants using a second party to reclaim funds. All corporations must also submit an affidavit stating that claimant is aware of State Law Requirements for being a personal representative of the corporation.	
[]	Documentation to substantiate claimant name change from original disbursement is needed.	
[]	Documentation of Certificate of Service to the U.S.	Attorney was not provided with application.
[]	Required Tax Identification Number or Social Security Number was not provided with application.	
[X]	Other: Th Corporate Seal is missing from the Notarized Power of Attorney. The area containing information regarding the missing corporate seal is not signed. Please resubmit the Power of Attorney with either the corporate seal or the Affidavit portion indicating that the corporate seal is unanvalable, signed.	
If you	u have any further questions, please call the Court at	716–362–3200.
		Paul R. Warren Clerk of Court
-	cla/Doc 102 .uscourts.gov	